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## FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

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1.	ndividual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations  (a) Name  Mi Familia Veta Civia Participation Compaign
_	Mi Familia Vota Civic Participation Campaign
_	(b) Address (number and street) check if different than previously reported 2525 W. Alameda Ave.
_	(c) City, State and ZIP Code  Denver
	(d) Name of Employer or Principal Place of Business (e) Occupation
3.	Is This Statement or Amended  Amended  New  4. Covering Period  Through  Amended  Amended
5.	(a) Date of Public Distribution(s) M M M O O O O O O O O O O O O O O O O
6.	The filer is a(n): (a) Individual (b) Unincorporated Organization (c) X Qualified Nonprofit Corporation (11 CFR 114.10)
	(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15  (e) Other, specify:
7.	Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?
8.	Custodian of Records
	(a) Name
	Normalicia Flores
	(b) Address (number and street) 4299 San Felipe Street
	(c) City, State and ZIP Code
	Houston TX 77027
	(d) Name of Employer or Principal Place of Business (e) Occupation
	MFV Civic Participation Campaign  Administrative Assistant
9.	Total Donations This Statement 87350.28
10	Total Disbursements/Obligations This Statement 10000.00
	Under penalty of perjury, I certify that this statement is true, correct and complete.
	TYPE OR PRINT NAME OF PERSON COMPLETING FORM  Ulibarri Michael Jessie
	SIGNATURE Electronically Filed by Ulibarri Michael Jessie DATE 10/25/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalities of 2 U.S.C. 437g.

FE3AN038.PDF FEC FORM 9 (REV. 12/2007)